## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

2450-0505P

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |                     |   |                                       |  |                     | SMALL ENTITY TYPE        |                     | ΩP   | OTHER THAN<br>OR SMALL ENTITY |   |                        |
|--|---------------------|---|---------------------------------------|--|---------------------|--------------------------|---------------------|--|-------------------------------|---|------------------------|
| TOTAL CLAIMS   |                     |   | 4                                     |  |                     |                          | RATE                | FEE  | ]<br>]                        | RATE                                    | FEE                    |
| FOR  |                     |   | NUMBER FILED                          |  | NUMBE               | ER EXTRA                 | BASIC FEE           | <del>                                     </del> | OR                            | BASIC FEE                               | 750.00                 |
| TOTAL CHARGEABLE CLAIMS  |                     |   | Ú minus 20= ★                         |  | * Ø                 |                          | X\$ 9=              |  | OR                            | X\$18=.                                 |                        |
| INDEPENDENT CLAIMS   |                     |   | / minus 3 =  * /                      |  |                     |                          | X42=                |  | OR                            | X84=                                    |                        |
| MU   | ILTIPLE DEPEN       | DENT CLAIM P                                | RESENT                                |  |                     |                          | +140=               |  | OR                            | +280=                                   |                        |
| * lf   | the difference      | in column 1 is                              | less than zero, enter "0" in column 2 |  |                     | olumn 2                  | TOTAL               | 375  | OR                            | TOTAL                                   |                        |
| CLAIMS AS AMENDED - PART II  |                     |   |                                       |  |                     |                          |                     | _  | OTHER                         |   |                        |
| _  | feature and account | (Column 1)                                  | (Column 2) HIGHEST                    |  |                     | (Column 3)               | SMALL               |  | OR                            | SMALL                                   | ENTITY                 |
| AMENDMENT A  |                     | REMAINING<br>AFTER<br>AMENDMENT             |                                       | NUME<br>PREVIC<br>PAID I                   | BER<br>OUSLY        | PRESENT<br>EXTRA         | RATE                | ADDI-<br>TIONAL<br>FEE                           |                               | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total               | *   | Minus                                 | **   |                     | =                        | X\$ 9≈              |  | OR                            | X\$18=                                  |                        |
|  | Independent         | * NTATION OF M                              | Minus                                 | linus *** TIPLE DEPENDENT C                |                     | =                        | X42=                |  | OR                            | X84=                                    |                        |
| <b>L</b>   |                     |   |                                       |  |                     |                          | +140=               |  | OR                            | +280=                                   |                        |
|  |                     |   |                                       |  |                     |                          | TOTAL<br>ADDIT. FEE |  | OR                            | TOTAL<br>ADDIT. FEE                     |                        |
|  |                     | ADDII. PEE                                  | <u> </u>                              |  | ADDIT. FEET         |                          |                     |  |                               |   |                        |
| AMENDMENT B  |                     | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                                       | (Colun<br>HIGH<br>NUME<br>PREVIC<br>PAID I | EST<br>BER<br>OUSLY | (Column 3) PRESENT EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE                           |                               | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total               | *   | Minus                                 | **   |                     | =                        | X\$ 9=              |  | OR                            | X\$18=                                  |                        |
|  | Independent         | * NTATION OF M                              | Minus                                 | ***  | C) AIA              | =                        | X42=                |  | OR                            | X84=                                    |                        |
| <b> </b>   | I FIRST PRESE       | INTATION OF IM                              | ULTIPLE DEI                           | PENDENT                                    | CLAIM               |                          | +140=               |  | OR                            | +280=                                   |                        |
|  |                     |   | TOTAL<br>ADDIT. FEE                   |  | OR                  | TOTAL<br>ADDIT. FEE      |                     |  |                               |   |                        |
|  |                     | (Column 1)                                  |                                       | (Colun                                     |                     | (Column 3)               |                     |  | _                             | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                        |
| AMENDMENT C  |                     | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                                       | HIGH<br>NUME<br>PREVIO<br>PAID             | BER<br>DUSLY        | PRESENT<br>EXTRA         | RATE                | ADDI-<br>TIONAL<br>FEE                           |                               | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total               | *   | Minus                                 | **   |                     | =                        | X\$ 9=              |  | OR                            | X\$18=                                  |                        |
| AME  | Independent         | *<br>NTATION OF M                           | Minus                                 | ***  | CLAMA               | [=                       | X42=                |  | OR                            | X84=                                    |                        |
|  | LINOTPRESE          | ATAHON OF M                                 | OLIFIC DE                             | LENDENI                                    | CLAIIVI             |                          | +140=               |  | OR                            | +280=                                   |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                     |   |                                       |  |                     |                          |                     |  |                               |   |                        |